

SCC eFile	2012 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	212524069				
1.) CORPORATION NAME: DUE DATE: 3/31/2012 Xylem, Inc.						
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: SCC ID NO: 07204449 VB BUSINESS SERVICES, LLC 500 WORLD TRADE CTR 101 W MAIN ST NORFOLK, VA 23510						
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: NORFOLK CITY						
4.) STATE OR COUNTRY OF INCORPORATION: VA						
5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>10,000</td> </tr> </table>			CLASS	AUTHORIZED	COMMON	10,000
CLASS	AUTHORIZED					
COMMON	10,000					
6.) PRINCIPAL OFFICE ADDRESS: <div style="text-align: center;"> ADDRESS: 1133 WESTCHESTER AVENUE CITY/ST/ZIP: WHITE PLAINS, NY 10604 </div>						
7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.						
NAME: GRETCHEN W MCCLAIN TITLE: PRESIDENT ADDRESS: 1133 WESTCHESTER AVENUE CITY/ST/ZIP/CO: WHITE PLAINS, NY 10604	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR					
NAME: MICHAEL SPEETZEN TITLE: VICE PRESIDENT ADDRESS: 1133 WESTCHESTER AVENUE CITY/ST/ZIP/CO: WHITE PLAINS, NY 10604	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR					
NAME: COLIN R SABOL TITLE: VICE PRESIDENT ADDRESS: 1133 WESTCHESTER AVENUE CITY/ST/ZIP/CO: WHITE PLAINS, NY 10604	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR					
NAME: ANGELA A BUONOCORE TITLE: VICE PRESIDENT ADDRESS: 1133 WESTCHESTER AVENUE CITY/ST/ZIP/CO: WHITE PLAINS, NY 10604	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR					
NAME: ROBYN T MINGLE TITLE: VICE PRESIDENT ADDRESS: 1133 WESTCHESTER AVENUE CITY/ST/ZIP/CO: WHITE PLAINS, NY 10604	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR					
NAME: MICHAEL L KUCHENBROD TITLE: VICE PRESIDENT ADDRESS: GESALLAGEN 33 CITY/ST/ZIP/CO: SUNDBYBERG, 17487, SE	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR					

NAME:	CHRISTOPHER R MCINTIRE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	600 UNICOEN PARK DRIVE		
CITY/ST/ZIP/CO:	WOBURN, MA 01801		
NAME:	KENNETH NAPOLITANO	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	8200 AUSTIN AVENUE		
CITY/ST/ZIP/CO:	MORTON GROVE, IL 60053		
NAME:	ROBERT E WOLPERT	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	17942 COWAN		
CITY/ST/ZIP/CO:	IRVINE, CA 92614		
NAME:	JOHN P CONNOLLY	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1133 WESTCHESTER AVENUE		
CITY/ST/ZIP/CO:	WHITE PLAINS, NY 10604		
NAME:	NICHOLAS A ANTHONY	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1133 WESTCHESTER AVENUE		
CITY/ST/ZIP/CO:	WHITE PLAINS, NY 10604		
NAME:	SAMIR H PATEL	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	1133 WESTCHESTER AVENUE		
CITY/ST/ZIP/CO:	WHITE PLAINS, NY 10604		
NAME:	OZZIE LLANES	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1133 WESTCHESTER AVENUE		
CITY/ST/ZIP/CO:	WHITE PLAINS, NY 10604		
NAME:	RINA E TERAN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	1133 WESTCHESTER AVENUE		
CITY/ST/ZIP/CO:	WHITE PLAINS, NY 10604		
NAME:	HENRY WANG	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	1133 WESTCHESTER AVENUE		
CITY/ST/ZIP/CO:	WHITE PLAINS, NY 10604		
NAME:	MARKOS I TAMBAKERAS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	6815 EAST CABALLO DRIVE		
CITY/ST/ZIP/CO:	PARADISE VALLEY, AZ 85253		
NAME:	STEVEN R LORANGER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	500 MAMARONECK AVENUE		
CITY/ST/ZIP/CO:	HARRISON, NY 10528		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GRETCHEN W MCCLAIN DIRECTOR 1133 WESTCHESTER AVENUE WHITE PLAINS, NY 10604	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CURTIS J CRAWFORD DIRECTOR 4800 GREAT AMERICAS PARKWAY SUITE 307 SANTA CLARA, CA 95054	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN J HAMRE PRESIDENT 1800 K STREET N.W. WASHINGTON, DC 20006	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	VICTORIA D HARKER DIRECTOR 4300 WILSON BLVD., 11TH FL ARLINGTON, VA 22203	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	STEN E JAKOBSSON DIRECTOR LANTMATERIBACKEN 3 VASTERAS, 72211, SE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	EDWARD J LUDWIG DIRECTOR 1 BECTON DR., MC077 FRANKLIN LAKES, NJ 07417	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SURYA N MOHAPATRA DIRECTOR 3 GIRALDA FARMS MADISON, NJ 07940	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ NICHOLAS AANTHONY SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	NICHOLAS AANTHONY, PRINTED NAME AND CORPORATE TITLE	6/26/2012 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			